
Utah State Hospital

Psychology Pre-doctoral Internship Program

2004-2005

Provo, Utah

Table Of Contents

Introduction	1
The Utah State Hospital	2
Location	2
The Historical Hospital	2
The Modern Hospital	3
Map of the Hospital Campus	3
The Psychology Pre-doctoral Internship Program.....	4
Mission Statement.....	4
Training Philosophy	4
Training Model and Goals	4
The Program Structure	5
Rotation Organization.....	5
Graduated and Sequential Nature of Training.....	6
Tracks	6
Training Seminars, Intern Presentations, And Psychology Service Meetings.....	6
Supervision	7
Evaluations.....	7
Internship Track Descriptions.....	8
General Clinical Psychology	8
Description.....	8
Requirements of the General Clinical Psychology Track.....	8

Assessment.....	8
Psychotherapy/Intervention.....	8
Consultation.....	8
Didactic Training.....	9
Developmental Neuropsychology.....	9
Description.....	9
Requirements of the Developmental Neuropsychology Specialty Track.....	10
(continued)	
Assessment.....	10
Psychotherapy/Intervention.....	10
Consultation.....	10
Didactic Training.....	10
Forensic Psychology Track.....	10
Description.....	10
Requirements of the Forensic Psychology Specialty Track.....	11
Assessment.....	11
Psychotherapy/Intervention.....	11
Consultation.....	11
Didactic Training.....	12
Hospital Units Available for Rotation.....	12
Children's Unit.....	12
Adolescent Unit.....	12
Adult Services.....	12
Life Habilitation Unit (LHU).....	13
Geriatric Unit.....	13
Forensic Unit.....	13
Formal Training Experiences and Seminars.....	14
Research	14
Statement of Diversity	14
Intern Benefits.....	15
Internship Site Status.....	15
References.....	15
Psychology Faculty	16
Full-Time Staff Psychologists	16
Consulting/Supervising Psychologists at USH	17
Other Contributing Mental Health Professionals at USH	20

Application Procedures	21
Submission Materials	21
Recruitment Procedure	22
Supplemental Application Form	24
APPIC Policy	25

Introduction

Dear Applicant:

I can still remember the thoughts and feelings of anticipation years ago as I both called and wrote letters to institutions requesting information about various internship sites and programs. Will I find the right match? Will the training be good? Is the internship in a desirable area of the country? Will I be accepted? Will I find a job after internship?

Perhaps you have some of the same questions. I would like to provide some information about our Internship site which may help you decide if our site can help you achieve your goals.

The Utah State Hospital is an APA approved Internship site. Our psychology discipline is committed to providing the highest quality patient care, training experience and opportunity for personal development.

Our goal is to match your interests, abilities and personality, with our training opportunities in General Clinical Psychology, Neuropsychology and Forensic Psychology. I am confident that the quality staff and multi-disciplinary treatment approach at our hospital will enhance your internship experience and facilitate your transition into the role of a professional psychologist. This internship provides the unique opportunity to work with patients of all ages suffering from severe and persistent mental illness.

In addition to the excellent training opportunities, Utah State Hospital is fortunate to be located in one of the most beautiful parts of our country. Situated at the foot of the Wasatch mountains, many recreational opportunities such as skiing, hiking and fishing are only moments away. I look forward to your application and hope to meet you in the near future.

With Anticipation,

Robert F. Sawicki, Ph.D.,
Director of Internship Training

ηηηηηηηηηηηηηηηη

The Utah State Hospital

Location

Located in Provo, Utah, the Utah State Hospital is situated 4,560 feet above sea level at the foot of the beautifully rugged Wasatch Range of the Rocky Mountains. Provo lies at the base of 11,750-foot Mount Timpanogos and is bounded on the west by the freshwater Utah Lake. The Hospital campus is a focal point of Provo, a city of 110,000 and Utah County, with 333,000 residents. Provo, Utah was ranked by Money Magazine in 1991 as the best place to live in the U.S. This rating was based on a consideration of health facilities, crime rate, the local economy, housing, education, transportation, weather, leisure, and the arts in the Provo area. Provo has continued to place in Money Magazine's top 30 most livable cities in the U.S. Nearby colleges include the University of Utah, Brigham Young University, Utah State University and Utah Valley State College.

Surrounding Provo to the north, south and east are spectacular scenic areas, including five national parks. Forty-five miles to the north is Salt Lake City, with a metropolitan area of about one million residents. Despite the urban and suburban quality of Salt Lake and Utah Counties, the mountains immediately adjoining both counties include four wilderness areas. Outdoor recreation, including hiking, snow and water skiing, golf, wind surfing, backpacking, fishing, hunting, mountain biking, and mountain climbing are available within a 5 to 30 minute drive from USH. The world renowned Sundance Resort that hosts Robert Redford's annual film festival, outdoor theater and ski resort is within a 15 minute drive from the hospital. Many other recreational and cultural activities can be found in Provo, Utah County, and in the Salt Lake City area including theater, symphony, ballet, opera and professional sports.

The Historical Hospital

The Utah State Hospital has a long and stable history of providing treatment to the chronically mentally ill. It began as the Territorial Insane Asylum in 1885 at Provo, which at that time was a day's travel from Salt Lake City. The site was some eight blocks from the nearest residence in Provo, and was separated from the city by swampland and the city dump. The message this conveys about the then-prevailing attitudes regarding mental illness is unmistakable.

The original purpose of the Hospital was to treat the mentally ill and to return them to a normal level of functioning. However, in spite of the best efforts on the part of the overworked staff, in its early days the facility was little more than a human warehouse. By 1955, the population at the hospital was over 1,500 patients.

The intervening years, however, have brought many changes. The swamp has been drained, the dump has been converted into a municipal park, and the city has expanded to the point that there is no longer a stark demarcation line where the "Asylum" begins.

Over the years, tremendous advances in psychiatric medicine have changed the role of the hospital to one of very active treatment and rehabilitation. Today, it is a thriving teaching facility, and is the only hospital in the state of Utah that provides long-term treatment and care for the chronically mentally ill. More effective treatments, rehabilitation and the movement toward deinstitutionalization and use of community mental health centers have decreased the size of the USH patient population to its present size.

The Modern Hospital

Today the Utah State Hospital (USH) is a residential psychiatric hospital, providing active psychiatric treatment services for 384 patients, most of whom experience severe and persistent mental illness. The Hospital serves all age groups from all geographic areas of the state. The Hospital receives its adult patients from 10 community mental health centers, as part of their continuum of care, and from the Utah correctional system. Children and youth may be referred by additional sources. All adult and pediatric beds are allocated to the mental health centers based on population.

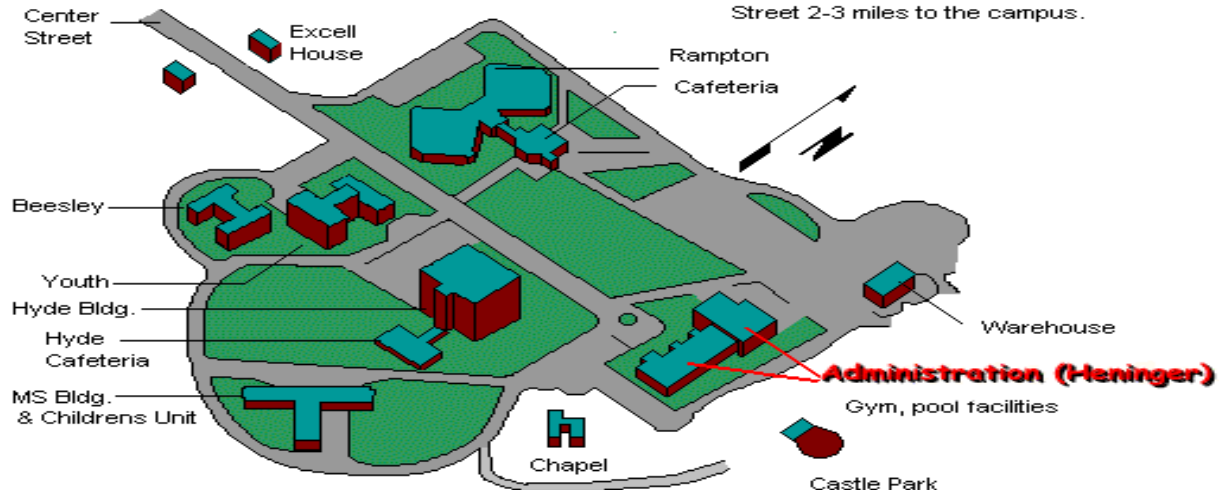
The present facility consists of 20 buildings with approximately 370,000 square feet of space, spread over a 300-acre campus. Patients and the facilities are cared for by over 700 staff members. Indoor recreational facilities, including a gymnasium, a swimming pool and a work-out room, and two cafeterias are available to staff.

The Utah State Hospital has received accreditation from the Joint Commission on Accreditation of Healthcare Organizations. This accreditation means that the Hospital has achieved national standards in the delivery of mental health care services. This voluntary evaluation is conducted every three years and represents a commitment from the staff of Utah State Hospital to the citizens of Utah, that quality health care for the mentally ill of Utah is provided here.

Map of the Hospital Campus

Utah State Hospital Campus Map

Directions: Take the I-15 Freeway to the Provo, Center Street Exit. Follow Center Street 2-3 miles to the campus.



The Psychology Pre-doctoral Internship Program

Mission

The mission of those in the Psychology Service is to deliver excellent inpatient psychiatric care to those who suffer severe and/or chronic mental illness. Furthermore, we strive to provide high quality training to pre-doctoral psychology interns as they become integrated into the professional practice of psychology.

Training Philosophy

The Utah State Hospital's Department of Psychology Services is committed to providing high quality professional training in clinical and counseling psychology based upon the integration of experiential, theoretical, and empirical knowledge. The Utah State Hospital psychology internship provides a setting in which clinical experience, didactic training, and ongoing research components each function to dynamically inform and upgrade the others to produce state-of-the-art, individualized, and sensitive patient care. Training procedures emphasize supervisory mentoring and graduated intern responsibility and participation in evaluation, treatment delivery, and outcome assessment.

The beginning intern is expected to apply fundamental clinical skills and empirical knowledge of effective measurement and intervention processes learned in graduate school to the assessment, treatment, and individual and community management of severe mental disorders. The supervisor serves as a role model and guide who helps to refine the intern's skills as well as to define professional standards for clinical inquiry, information acquisition, case conceptualization, cultural and contextual sensitivity, interdisciplinary consultation, treatment service delivery, and outcome tracking. Interns are further assisted in their professional development by a staff of nationally recognized psychology consultants who offer training seminars on cultural and ethnic diversity, current research findings, and specialized strategies for assessment and intervention. Although the internship's primary emphasis is on experiential development of clinical skills, both the institution and the training staff provide encouragement, opportunity, and support for research inquiry.

Training Model and Goals

The Utah State Hospital psychology internship is based upon the scientist x practitioner model of education and training. The essential characteristics of this model have been explicitly defined by the National Conference on Scientist-Practitioner Education and Training for the Professional Practice of Psychology (Belar & Perry, 1992). The goal of the internship experience is to produce independent clinicians who can apply the empirical knowledge base of psychology and the methodologies of inquiry in human sciences to the clinical mental health problems of individuals and groups. As an outgrowth and corollary of this goal, the clinical intern will also learn to make small but necessary local contributions to that knowledge base by scientifically refining and extending existing paradigms when they are insufficient to assist the troubled individual within his or her own unique set of psychosocial processes and contextual parameters (Kanfer, 1990; Stricker & Trierweiler, 1995). This philosophy emphasizes the acquisition of a professional skill and responsibility level above that of a practitioner or technical specialist. Thus interns progressing through the training program contribute a breadth and depth of knowledge and a degree of clinical independence and innovation that is in keeping with the hospital's mission to provide excellent inpatient psychiatric care.

The Program Structure

The Utah State Hospital's Psychology Pre-doctoral Internship Program accepts interns in both clinical and counseling psychology trained at either APA- approved Scientist-Practitioner (Ph.D.) or APA-approved Professional (Psy.D.) model universities. Prospective applicants should have completed all requirements for the Ph.D., except dissertation and internship, prior to the beginning of the internship year, July 1, including a minimum of 500 hours of adequate and appropriate supervised practicum training.

Rotation Organization

Clinical training is organized into two rotations that may be divided into 3-month/9-month or 6-month/6-month training periods. Decisions about rotation lengths are made by the intern, primary supervisor, and university clinical director in consultation with the Director of Training during the first week of the internship. A 3-month/9-month sequence is generally appropriate for the intern who has strongly concentrated interests and some practicum-based background with a specific population residing in a unit available for rotation (children, geriatrics, forensic patients, etc.). Alternatively, this rotation sequence may assist the intern whose prior experience with inpatient treatment or severe mental illness is limited and who may benefit from a gradual introduction to the psychologist's responsibilities in an intensive residential treatment setting. Since the average state hospital stay for a patient is six to nine months, the 3-month/9-month sequence gives the intern the opportunity to follow several patients from admission to discharge, assuming responsibility, where appropriate, for the patient's psychological treatment and community adjustment planning. The intern selected for this sequence will serve an initial 3-month general clinical rotation on a unit that can provide an introduction to hospital procedures and the challenges presented by the unique population and setting. This will be followed by a 9-month, in-depth, comprehensive experience with their primary population of interest.

The 6-month/6-month sequence is well-suited to the intern who has had significant practicum experience with severe mental disorders and who desires to achieve versatility and broad exposure to assessment and intervention strategies in an inpatient setting. This rotation sequence is of particular benefit to interns who anticipate serving smaller communities in which they may need to provide a broad range of services to individuals of diverse ages, problems, and situations. The intern selected for this rotation schedule will serve two intensive, long-term rotations on units serving two significantly different psychiatric populations (dual diagnosis and geriatric, for example), becoming a primary contributing member of the treatment teams on both units.

Graduated and Sequential Nature of Training

Throughout the year, intern responsibilities follow a logical progression from intense supervision and didactic training, through moderate clinical decision-making experiences, culminating in guided, independent practice and consultation. Initially, interns spend significant time shadowing supervisors, observing experienced staff members, and attending training and case presentation sessions designed to prepare them for service delivery to the challenging inpatient population. These activities evolve into clinical experiences in which the intern assists the supervisor or works under supervisory observation. Later, interns perform assessment and intervention responsibilities with supervisory consultation only in regularly scheduled weekly sessions. Ultimately, interns become competent to respond to referrals, assess cases, plan treatment, deliver appropriate interventions and consult to multidisciplinary teams independently, with supervisory assistance functioning mainly to confirm clinical decisions and encourage professional confidence.

Tracks

Three types of internship tracks are offered: General Clinical, Developmental Neuropsychology, and Forensic Psychology. The intern selecting a particular track will focus on acquiring track-specific skills with the populations with which they are completing their six- or nine-month rotations. For instance, an intern in the developmental neuropsychology track, who is completing a six- or nine-month rotation on the Children's unit, will have a pediatric neuropsychology focus. As the intern changes rotations, he or she will gain experience with a different population.

Training Seminars, Intern Presentations, And Psychology Service Meetings

The psychology staff presents monthly intern training seminars focusing on case presentations, specialized assessment and intervention techniques, ethical issues, or research updates. Additionally, consulting psychologists from universities and other state and private agencies give presentations to the internship at least once per month on cultural diversity issues, technological advances, and other topics directly impacting the practice of psychology. Interns are also encouraged to attend colloquia and continuing education activities sponsored by the hospital and

University of Utah Medical Center. In addition to psychology staff training seminars, specific specialty tracks require interns to attend a series of training sessions given by the track supervisor(s).

Two times during the year, each intern gives a presentation, to the psychology staff and other interns, of a case for which they are the primary evaluator or therapist, or both. Following the presentation, interns and psychology staff engage in discussions of case material. This experience provides the intern with exposure to a variety of strategies for case conceptualization and treatment, while preparing him or her for case presentations in a multidisciplinary team setting. Once during the year, each intern will give a research presentation detailing and explaining progress and/or results of their original research project.

All interns and psychology staff attend a one-hour weekly psychology service meeting. A portion of this meeting is devoted to internship business and concerns. This format gives interns an opportunity to bring problems and training issues to the attention of the entire training staff and encourages a cooperative effort in addressing internship problems. In addition to staff meetings, interns meet individually with the Director of Training for one-half hour during the last week of each month to discuss progress, supervision, training, and research needs.

Supervision

For each rotation, each intern is assigned one or two principal staff supervisors who provide at least two hours of scheduled face-to-face individual supervision per week and two hours of supervision in a group setting. Two to three additional hours of supervision, related to specific case consultations or intern training needs, will be given on an informal basis. An additional supervisor may be appointed by the Director of Training if an intern encounters a case requiring specialized knowledge in that supervisor's area of expertise. Members of other disciplines may function in an adjunct supervisory capacity to interns dealing with specialized issues such as medication response and side effects, residential behavior management, legal issues impacting patients, and so forth.

Evaluation

During orientation activities in the first week of the internship, interns complete a self-assessment survey estimating their baseline skills in assessment, intervention, consultation, research, ethical and legal conduct, responding to supervision, and delivering professional presentations. This self-evaluation is discussed by the intern and supervisor to help determine training needs and is then reviewed with the Director of Training. It is similar in format and content to the quarterly evaluations that will be completed by supervisors throughout the internship, and the intern's responses help to provide a point of comparison for assessing skill acquisition throughout the year. In addition to quarterly supervisor evaluations, the psychology staff will meet midway through the internship and at the end of training to describe and discuss each intern's progress. After this meeting, the Director of Training will provide a narrative report to each intern's doctoral program. At the end of the training experience, each intern will complete an outcome self-assessment measure.

Interns evaluate supervisors, specialty track trainings, and rotations quarterly using an empirically derived rating scale for training programs. Evaluations are discussed with supervisors and returned to the Director of Training. Upon completion of the internship, interns complete a program survey evaluating the internship experience as a whole. The internship will also mail alumni survey forms to each intern for five successive years post-internship to give former interns an opportunity to report professional accomplishments and challenges, make suggestions, and evaluate the efficacy of the internship for preparing them for independent clinical practice.

Internship Track Descriptions

General Clinical Psychology

Description

The General Clinical Psychology Track is, as implied, a track that offers training in and exposure to a broad range of clinical activities. The goal of the track is to prepare the intern to be qualified to provide competent psychological services in settings that require a broad range of skills. It is anticipated that having a diverse experience will also develop adaptive and flexible characteristics that will allow a psychologist to respond effectively to the demands created by unforeseen changes in the mental health field.

We are attentive to individual differences in training needs. A diversity of opportunities and resources is available for the interns to utilize in developing, under the guidance of the Director, a program in keeping with their

unique interests and professional goals. While some experiences are required of all interns, the individual needs, interests, and professional goals of each intern will be considered in determining supervised activities throughout the year.

The clinical experiences in general clinical psychology are designed to provide the intern with didactic and experiential training in at least two different populations (child, adolescent, adult, geriatric) and have opportunities to be exposed to neuropsychological and law-related case studies and didactic trainings. The general clinical psychology track offers opportunities to work with a wide range of diagnoses across severely and persistently mentally ill (SPMI) patients, such as schizophrenic spectrum disorders, mood spectrum disorders, dual diagnosis disorders, dementia spectrum disorders, SPMI patients with concomitant medical illness, SPMI patients with concomitant Axis II psychopathology and patients with somatoform disorders.

Requirements of the General Clinical Psychology Track

Assessment: During the General Clinical Psychology Track, training will focus on the population associated with the unit rotation to which the intern is assigned. On average, interns completing a specific rotation will conduct a minimum of two intake interviews per week on the designated unit. Interviews will include the administration of the Brief Psychiatric Rating Scale (BPRS). The intern will also administer approximately one psychological assessment biweekly. Assessments will incorporate empirically validated measures, and will demonstrate adequate understanding of psychopathology, personality processes, neuropsychological domains, medical issues, and socio-cultural factors and how they interact.

Psychotherapy/Intervention: General Clinical Psychology Track interns will maintain 1-2 patients in individual therapy throughout a rotation. In addition, they will facilitate or co-facilitate at least two structured psychotherapy groups addressing two different clinical problems.

Consultation: Consultation is a primary activity on the General Clinical Psychology Track. Consultations about patient clinical issues may be accomplished formally in a treatment team setting, or informally with the patient's psychiatrist, social worker, or family. The General Clinical Psychology staff is typically asked to provide consultations regarding health risk reduction (medication compliance, smoking cessation, obesity) and behavioral intervention for the purposes of treatment and discharge planning. During their rotations on units, the intern will attend at least one multidisciplinary treatment team meeting per week.

Didactic Training: All interns participating in General Clinical Psychology track will be expected to attend throughout the year monthly scheduled lectures or case presentations as arranged or presented by core psychology staff. Interns will be required to do assigned readings for the training sessions. General Clinical Psychology interns will be required to present two cases during the year, at least one of which involves a patient from a minority cultural background. As part of case presentations, interns will review and present literature pertinent to case conceptualization, empirically supported intervention, and cultural context variables.

Developmental Neuropsychology

Description

Training in developmental neuropsychology is intended to provide a conceptual framework for considering the impact of individual differences in cognitive functioning upon physical, emotional, and social behavior and perceptions. Track experiences focus upon understanding the biological bases of psychiatric illnesses, developmental problems, and losses of function across the full spectrum of stages of human development. Although training is concentrated in the child/youth population, the neuropsychology intern will gain experience with all major developmental/neuropsychological populations in residence at the hospital (adult, geriatric, neurologically injured or compromised, and developmentally delayed). Intern responsibilities and competencies include making determinations regarding individuals' functional skills, treatment options, rehabilitation potential, compensatory alternatives, and optimal living arrangements. The Utah State Hospital neuropsychology staff provides consultative assistance to the treatment teams on all units of the hospital.

The Developmental Neuropsychology Track Training is designed to give the intern a broad competence in selecting, administering, and interpreting the wide range of assessment measures employed in neuropsychology practice. Such competence includes knowledge of the reliability, validity, specificity, and sensitivity of measures with regard to specific populations or referral questions.

Beginning with supervisory role modeling and mentoring, the intern will gradually achieve independence in designing and delivering behavioral/cognitive/environmental interventions. Interns will work with medical and residential staff to design treatment and management programs. In addition, interns will assist families in understanding the impact of individual differences upon relationships, modifying environments, and creating compensatory and remedial strategies. The neuropsychology track intern must elect to serve a six or nine month rotation on the child/youth units. The second rotation may be on any other unit of the intern's choice pending the approval of the track supervisor and Director of Training.

Requirements of the Neuropsychology Specialty Track

Assessment: Interns electing the neuropsychology track will learn to administer, score, and interpret a broad range of neuropsychological measures assessing intellectual, academic, memory, language, perceptual, motor, executive, and personality/behavioral functions. Emphasis is placed upon learning how to select test batteries appropriate for use with individuals of different ages and ability levels and for answering specific referral questions. Passing an observational examination is required before administering neuropsychological tests to patients. Integration of neuropsychological findings with background, personality, cultural, medical, and neuroimaging data is a strong focus of training. Interns will develop the skills necessary to administer and report on at least one neuropsychological assessment biweekly.

Psychotherapy/Intervention: Neuropsychology Track interns will meet with families of each of their patients (and patients when appropriate) approximately once per month to provide supportive therapy, explain evaluation results, assist with behavior management strategies and provide education regarding compensatory strategies for specific neuropsychological dysfunctions. Interns will work with a maximum caseload of three families at a time. Additionally, interns will treat two patients during the year with structured cognitive enhancement or remediation therapy.

Consultation: Neuropsychology interns will attend a minimum of one multidisciplinary team meeting per week on a unit to which they are assigned. Interns will present cases they have assessed in treatment team meetings, first with supervisory assistance and participation, and later independently. Interns will also consult with residential and medical staff informally on an as-needed basis.

Didactic Training: Interns participating in the neuropsychology specialty track will attend six months of weekly 1-2 hour training sessions on current research in neuropsychology, case presentations, test selection, information gathering, and remedial interventions. Interns will complete, and be prepared to discuss, assigned readings for some sessions. Each intern will give two complete presentations of a case from a neuropsychological perspective during the year. This presentation is to include a review of literature relative to the patient's diagnosis or neurological condition, cultural variables, and empirically supported intervention techniques.

Forensic Psychology Track

Description

Participation in the Forensic Psychology Track requires commitment to a 9-month rotation on the Utah State Hospital Forensic Unit. The additional 3-month rotation may be served on any other unit of the intern's choice pending approval by the track supervisor and Director of Training.

The Forensic Psychology Track intern will focus upon evaluation and treatment of inpatients committed to the state hospital Forensic Unit by the criminal courts of the State of Utah. Nearly all commitments fall into one of the following categories: Competence to Stand Trial Evaluation, Incompetent to Stand Trial Commitment, Guilty and Mentally Ill Evaluation, Guilty and Mentally Ill Commitment, Insanity or Diminished Capacity Evaluation, or Not Guilty by Reason of Insanity Commitment. The average length of stay for a forensic patient is six months, although evaluation cases average only four to six weeks stay. Primary diagnoses of patients on the unit range

widely from chronic psychoses to severe personality disorders. During the 3-month rotation on a different unit, the intern will work with cases involving non criminal legal issues such as custody, guardian ad litem, right to refuse medication, Americans with Disabilities Act, and civil commitment.

Requirements of the Forensic Psychology Specialty Track

Assessment: Forensic psychology track interns will become proficient and knowledgeable in observational, interview, testing, and pattern analysis techniques for detecting symptom invalidity and differentiating between psychopathology and antisocial personality. Interns will begin by administering and interpreting the BPRS and progress to more in-depth structured interview and evaluation procedures validated for use with forensic patients. Throughout the 9-month forensic rotation, interns will observe court-appointed forensic evaluators and will administer, interpret, and report upon all major portions of a competency assessment. Interns will be able to distinguish between mental illness and incompetency, and will be able to articulate the ethical standards applicable in forensic settings as contrasted with those applicable in other areas of mental health treatment. The intern will complete and present to the forensic clinical staff at least one full psychological report addressing a major forensic issue. This report should be of comparable quality and style to those requested by the criminal courts. Interns will also complete psychological assessments of individuals involved in non-criminal legal proceedings. In all court-related assessments, interns will demonstrate an awareness of the potential impact of thought disorders, mood disorders, personality disorders, and marginal intellectual functioning upon legal decisions and considerations. Interns will accompany at least one patient to court to observe how evaluation results are used. Interns will complete approximately one full psychological assessment per month.

Psychotherapy/Intervention: Each intern selecting the Forensic Psychology Track will treat 1-2 patients in individual cognitive-behavioral therapy for stress management or adjustment issues. Additionally, interns will facilitate or co-facilitate group milieu therapy to assist patients with restoration to competence and preparing to participate with court proceedings.

Consultation: The psychologists on the forensic unit functions primarily as coordinators of evaluative services by independent psychological examiners and as an evaluator of psychiatric patients committed for treatment. On the forensic unit, the intern will attend the daily morning staff meeting in which the intern, with supervisory assistance at first, will present assessment results and progress reports for patients in group and individual treatment. On other units, during the 3-month rotation, the intern will attend and participate in at least one multidisciplinary treatment team meeting per week.

Didactic Training: Interns will attend a series of didactic training sessions presented by the forensic rotation supervisor on case law relevant to forensic issues in psychology. Interns will prepare to discuss assigned readings and present at least one case conforming to a forensic classification. Interns will attend at least one state or national conference on forensic or legal issues in psychology during the year. Throughout the year the intern will attend various case clinical presentations dealing with Competence to Stand Trial issues presented by Court Appointed Evaluators from the community.

Hospital Units Available for Rotation

The Children's Unit serves 24 boys and girls, ages 6 to 13 years, and is located on the second floor of the Medical Services building. These children have experienced mental, emotional, and behavioral problems such as posttraumatic stress disorder, pervasive development disorder, attention deficit disorder, psychosis and/or a mood disorder.

The Adolescent Unit serves 48 male and female youth, ages 13 to 18 years, housed in the Beesley Youth Building. In addition to the problems typically experienced by our younger patients, some of the youth may have a conduct disorder.

On both the Children's and Adolescent Units the individualized treatment approach is used to meet the needs of the patient and to utilize a broad spectrum of therapeutic modalities. Therapies include individual, group, family and play therapy, as well as therapeutic milieu. Specialized services include groups for anger management,

emotion management, and recreational therapy. Participation in a wide variety of activities such as skiing, camping and river rafting, helps the youth to increase self-esteem, learn impulse control, and to learn needed social skills.

Family involvement is important in the development and progress of the childrens' and youth treatment programs. The Hospital involves families by conducting the Pediatric Services Family Program which includes family therapy, family support and advocacy. Home visitation by the patient is an integral part of the treatment process and regular family visits at the Hospital are encouraged.

ηηηηηηηη

Adult Services is comprised of four adult treatment units, respectively known as Northwest, Northeast, Southeast, and Southwest according to their location in the Lucy Beth Rampton Building. Each unit provides care for a total of 30 men and women. Each unit also utilizes several areas designed for patient comfort and pursuit of individual interests, including a large outdoor courtyard, a cooking area, a craft room, and day rooms containing televisions and stereos. These provide a bright and open atmosphere conducive to the goal of Adult Services, that of providing a safe and healing environment in which all people are treated with dignity and respect. The purpose of treatment is to assist patients to reach their potential, via individualized treatment, with an aim toward returning patients to the community. A high value is placed on meeting the needs of each patient in a humanistic, caring, and professional way.

ηηηηηηηη

The Life Habilitation Unit is a 29-bed, adult treatment unit housing both men and women. The focus of the unit is to clinically stabilize the patient and teach the necessary life skills to maintain a quality of life free from psychiatric hospitalization. We believe people will live up to or down to expectations of them. This simple philosophy is reflected in the patient's treatment plan, the unit's programming, and discharge planning. Patients are given clear expectations upon admission. When patients meet these expectations, they are given a pass that allows them to come and go from the unit on their own. The objective is to restore the responsibility for their well-being back to the patient, so that they will begin to set positive expectations for themselves.

ηηηηηηηη

The Geriatric Unit serves 30 patients, both men and women, and is located on the second floor of the Hyde Building. Individuals with dementia and chronic mental illness are extensively represented on this unit. This unit is also known as the "Hope Unit" since it is the goal of the program to offer hope to patients sixty-years and older who require special understanding, care, and attention. While the Unit's goal is the same as that for all patients at the Utah State Hospital, that of returning them to the community, the geriatric treatment approach is highly individualized in recognition of the special needs and limitations posed by age and related physical problems. Patients with organic disorders are encouraged to do as much as possible for themselves, as are the chronically mentally ill. They are encouraged to take care of their own personal needs and remain active. The unit environment assists in accomplishing these goals by stimulating mental and physical activity. Patients without serious levels of dementia are extensively involved in group, family and individual therapy. There is a special emphasis on providing a large variety of small groups that encourage exercise and social skill development or retention.

ηηηηηηηη

The Forensic Unit is a maximum security, 74-bed unit located in the Southeast corner of the campus. This is a new facility (opened in September 1999) and is currently at three quarters occupancy. The unit serves both male and female forensic patients. Treatment includes a combination of pharmacotherapy; individual, group, and family psychotherapy; work opportunities; physical therapy; and occupational therapy. Patient input is encouraged at all levels of treatment to help teach individual responsibility and accountability. Patient self-government is an important part of the treatment on the Forensic Unit by encouraging patients to become involved with those around them and by providing them with an opportunity to positively influence others. It is the goal of the Forensic Unit to help prepare each patient to re-enter society as a productive, contributing member when they are released from the correctional system.

Formal Training Experiences and Seminars

As a supplement to individual supervision, interns attend a series of conferences and seminars intended to broaden the range of their clinical experiences and the theoretical diversity to which they are exposed. The conference schedule includes the following training opportunities:

- | | |
|------------------------------|---|
| 1) Head Injury | 2) Sexual Orientation Diversity |
| 3) Learning Disabilities | 4) Group Psychotherapy |
| 5) Neuroimaging | 6) Professional/Legal/Ethical Issues |
| 7) Cultural/Ethnic Diversity | 8) Psychopharmacology |
| 9) Gender Issues | 10) Juvenile Legal Issues |
| 11) Religious Diversity | 12) Substance Abuse |
| 13) Clinical Research Design | 14) Case Law |
| 15) Gerontology | 16) Case Conferences |
| 17) Anxiety Disorders | 18) Forensic Competency Evaluations |
| 19) Genetic Issues | 20) Behavioral Medicine/Health Psychology |

Presenters at seminars include USH psychology and psychiatry staff, renowned psychologists in the community, or local university professors. The seminars are designed to introduce interns to alternative orientations and approaches to clinical and counseling practice.

Research

Participation in clinical research investigation is an integral part of the Utah State Hospital internship learning experience. Although the focus of the internship training is the development of applied skills, a primary value and goal of the training program and the hospital itself is the enhancement and extension of the clinical knowledge base as it pertains to individuals with severe and persistent mental illness. Staff-initiated research projects currently in progress include the Child Memory and Neuro-imaging Project and the BPRS outcome study. In addition to making a substantive contribution to one or more of the ongoing projects, interns are required to design, conduct, and write for publication an independent small-scale clinical research project involving a specific hospital sample or an existing database. Intern research projects require approval from the Track Supervisor, Director of Training, and the Utah State Hospital Institutional Review Board. Preparation of a brief prospectus for submission to the Institutional Review Board is required within the first ten weeks of internship.

Statement of Diversity

The Psychology Service of the Utah State Hospital recognizes and supports the strength of diversity within its staff. We provide equal opportunities for all qualified persons, and do not discriminate on the basis of race, ethnicity, religion, gender, sexual orientation, national origin, or age. Based upon our belief that individual differences enrich the scholarly and professional activities of psychology, we wish to encourage applicants with personally or culturally diverse backgrounds to apply.

Intern Benefits

Interns for the 2003-2004 internship year will be paid a stipend of \$17,000.00 for full time work. Although not a benefitted position, interns are able to take advantage of many opportunities that are available to hospital personnel, including use of on-campus recreational facilities, discount tickets, free vaccinations, credit union membership, travel discounts, computer training, free hospital parking, and access to counseling with the Employee Assistance Program.

Internship Site Status

Utah State Hospital's Psychology Pre doctoral Internship Program was approved by APPIC in October of 1997. Utah State Hospital's Psychology Pre doctoral Internship Program received full, five-year APA accreditation dating from April, 1999.

References

Belar, C. D., & Perry, N. W. (1992). National conference on scientist-practitioner education and training for the professional practice of psychology. American Psychologist, 47(1), 71-75.

Kanfer, F. H. (1990). The scientist-practitioner connection: A bridge in need of constant attention. Professional Psychology: Research and Practice, 21 (4), 264-270.

Stricker, G., & Trierweiler, S. J. (1995). The local clinical scientist: A bridge between science and practice. American Psychologist, 50 (12), 995-1002.

Psychology Faculty

The Utah State Hospital has a large interdisciplinary staff. Psychiatrists and other physicians, social workers, psychologists, nurses, recreational therapists, occupational therapists, administrative and support staff all work closely together. Psychologists are valued members of the treatment units. There is a positive interdisciplinary, collegial relationship among members of the various disciplines. Our focus is on providing care to patients rather than professional competition. Staff involved with the Psychology Pre doctoral Internship Program include:

Full Time Staff Psychologists

Gerald A. Berge, Ph.D.

Brigham Young University (1981), Clinical Psychology, APA Approved
Licensed Psychologist: Utah (1984 to present)

Current Position(s): Utah State Hospital, Staff Psychologist

Interests: Forensic Evaluations, Competency to Stand Trial, Malingering (psychosis and neuropsychological deficits), Dementia, Neuropsychological Screenings

Orientation: Cognitive/Behavioral

Alan J. Crist, Ph.D.

Auburn University (1995), Clinical Psychology, APA Approved

Licensed Psychologist: Utah

Current Positions(s):

Utah State Hospital, Staff Psychologist (1999-present)

Past Director of Internship Training (2001-2002)

Interests: Geriatrics, Neuropsychology, Rorschach Inkblot Method

Orientation: Cognitive/Behavioral

Nancy Louise Howes, Ph.D.

Brigham Young University (1997), Clinical Psychology, APA Approved

Licensed Psychologist: Utah

Current Positions(s):

Utah State Hospital, Staff Psychologist (1999-present)

Interests: Neuropsychological Assessment of Youth and Children, Developmental Disabilities,
Cognitive Rehabilitation, Health Psychology and Sex Offender Treatment.

Orientation: Behavioral, Neurocognitive Enhancement

Frank M. Rees, Ph.D.

Brigham Young University (1987), Clinical Psychology, APA Approved

Licensed Psychologist: Utah

Current Position(s):

Utah State Hospital, Director of Psychological Services (2003 - present)

Director of Training and Internship (2002 – present)

Adjunct Professor (1996-Present) Department of Psychology, Brigham Young University

Interests: Pediatric Psychology, Forensic Psychology, Psychopharmacology, Individual Therapy, Group Therapy, and Psychological Assessment.

Orientation: Psychodynamic, Cognitive, Behavioral

Melvin W. Sawyer, Ph.D.

Brigham Young University (1975), Educational Psychology

Licensed Psychologist: Utah (1985-present)

Current Position(s):

Utah State Hospital, Staff Psychologist (1988 - present)

Adjunct Professional, Department of Psychology, Brigham Young University (1995-present)

Interests: Assessment, Inpatient Treatment, Rehabilitation Psychology, Assertiveness

Training/Anger Management, Group Therapy, Geriatric Assessment for

Organicity and Treatment

Orientation: Cognitive/Humanistic

Robert F. Sawicki, Ph.D.

Kent State University (1981).

University of Nebraska, Postdoctoral Fellow in Clinical Neuropsychology (1984)

Licensed Psychologist: Utah, Nebraska

Current Position: Pre-doctoral Internship Training Director, Staff Psychologist, Utah State Hospital (2001-present).

Interests: Neuropsychological assessment, Cognitive-Rehabilitation, Forensic Psychology,

Geriatric Psychology, Assessment of Children and Adults.

Orientation: Analytic

Adjunct Consulting/Supervising Psychologists at Utah State Hospital

Dean E. Barley, Ph.D.

Brigham Young University (1993), Counseling Psychology

Licensed Psychologist: Utah (1994- present)

Current Position(s):

Private Practice (1995 - present): Psychological evaluations, psychotherapy, biofeedback, and hypnosis with Intermountain Pain Management Center, Orem, UT.

Individual, group, and marital psychotherapy. Psychological evaluations for the Division of Disability Determination Services and the Division of Rehabilitation Services. This includes evaluations and psychotherapy for Hispanic Rehabilitation clients.

Interests: Assessment of Spanish Speakers, Inpatient treatment, Health Psychology, Chronic Pain, and Biofeedback.

Orientation: Humanistic/Cognitive

Sally H. Barlow, Ph.D., ABPP

University of Utah (1978), Counseling Psychology, APA Approved

Brigham Young University (1985), Recertification in Clinical Psychology, APA Approved

Licensed Psychologist: Utah (1980 - present)

Current Position(s):

Professor of Psychology, Brigham Young University (1998 - present)

Associate Director, Clinical Psychology Ph.D. Program, BYU (1997 - present)

Medical Staff, Utah Valley Regional Medical Center, Provo, UT (1985 - present)

Interest Areas: Group Psychotherapy, Psychotherapy Techniques with Personality Disorders, Gender and Diversity Issues

Orientation: Psychodynamic

Erin D. Bigler, Ph.D., ABPP/ABCN

Brigham Young University (1974), Experimental-Physiological Psychology

Licensed Psychologist: Utah, Texas, Arizona

Diplomate, American Board of Professional Psychology (Clinical Neuropsychology)

Current Position(s):

Psychology Department Chair, Brigham Young University (1996 - present)

Professor of Psychology, Brigham Young University (1990 - present)

Interest Areas: Diagnostic Clinical Neuropsychology; Neuroimaging

Orientation: Psychophysiological

Gary M. Burlingame, Ph.D.

University of Utah (1983), Counseling Psychology, APA Approved

Licensed Psychologist: Utah (1984 - present)

Current Position(s):

Professor of Psychology, Brigham Young University (1996 - present)

American Group Psychotherapy Association, Research Committee (1995 - present)

Member, Utah State Licensing Board (1994 - 1999)

Associate Editor (1996 - 2001), Group Dynamics: Theory, Research and Application.

Interest Areas: Group Psychotherapy Research and Practice, Measurement of
Psychotherapy Outcome, and Research Design.

Orientation: Psychodynamic

Nancy Cohn, Ph.D.

University of Utah (1983), Clinical Psychology

Licensed Psychologist: Utah

Current Position(s):

Private Practice (1988-present) assessment, psychotherapy, forensic evaluations, Salt Lake City

Designated Examiner, Utah State Division of Mental Health

Courtesy Staff, U. of Utah Neuropsychiatric Institute, Salt Lake City, and Davis Hospital, Layton

Adjunct Assistant Professor (1992 to date) Department of Psychology, University of Utah

Adjunct Clinical Faculty (1988 to date) Department of Psychiatry, U. of Utah, Forensic Div.

Interests: Forensic issues, competency, rape trauma and battered women's syndrome,
custody

Orientation: Cognitive-Behavioral

Juan Mejia, Ph.D.

University of Utah (1981) Clinical Psychology with emphasis in Marriage and Family Therapy and Cross-cultural assessment.

Licensed Psychologist: Utah (1983-present)

Current Position(s):

Private Practice, Psychological evaluations, psychotherapy (1988-present)

Adjunct Assistant Professor, Department of Psychology (clinical), University of Utah (1985- present)

Interests: Cross-cultural Issues, Psychometric assessment within the Hispanic culture.
Marriage and Family Therapy.

Orientation: Integrative

Stevan Lars Nielson, Ph.D.

University of Washington (1984), Seattle, WA

Licensed Psychologist: Utah

Current Position(s):

Associate Professor of Psychology, Brigham Young University (1988 - present)

Interest Areas: Projective and Personality Assessment, Rorschach

Orientation: Cognitive

Patrick T. Panos, Ph.D., ABPP

Brigham Young University (1993)

Diplomate in Counseling Psychology by the American Board of Professional Psychology (ABPP)

Licensed Psychologist: Utah (1994 to present)

Current Position(s):

Assistant Professor, Brigham Young University (1987 - present)

Consultant, International Psychological Consultants (1991 - present)

Clinical Neuropsychologist Consultant, Utah State Hospital (1995 - present)

Interests: Neuropsychology, Neuroimaging, Neuro-Rehabilitation, Biofeedback,
Psychophysiology, Family Therapy, Child Therapy.

Orientation: Cognitive-Behavioral, Process-Specific Cognitive Rehabilitation

Richard A. Weaver, Ph.D.

Brigham Young University (1976), Clinical Psychology, APA Approved

Licensed Psychologist: Texas (1980 - present); Utah (1981 - present)

Current Position(s):

Staff Clinical Psychologist, Inpatient Psychiatry Unit, Veterans Administration Medical Center, Salt Lake City, Utah (1981 - present)

Assistant Professor, Counseling Psychology Program, University of Utah, (1983 - present)

Adjunct Faculty, Department of Psychiatry, University of Utah, (1989 - present)

Adjunct Faculty, Department of Psychology, Brigham Young University, (1995 - present)

Interest Areas: Computer-assisted Assessment, Psychotherapy, Education, and Research
(CAPER), Computerized Treatment Planning

Orientation: Cognitive

Other Contributing Mental Health Professionals at Utah State Hospital

Isaac L. Thomas, MSW, LCSW

Brigham Young University (1987), Social Work

Licensed Clinical Social Worker, Utah (1996 - present)

Current Position(s):

Director of Quality Resource Management, Utah State Hospital; Provo, Utah

Interest Areas: Measurement of Treatment Outcome at the Utah State Hospital

Orientation: Humanistic

Madhu Gundlapalli, M.D.

University of Connecticut Health Center (1997)

Licensed Medical Doctor, Utah and Connecticut

Current Position(s):

Psychiatrist, Utah State Hospital (1998- present)

Interest Areas: Neurological and Health concerns in the Mentally Ill

Orientation: Physiological

Application Procedures

Submission Materials

Note: The Utah State Hospital Psychology Internship accepts qualified applicants from Ph.D. and Psy.D. programs in counseling and clinical psychology. However, because of research requirements and the need for interns to understand reliability and validity of assessment and intervention procedures with specialized patient populations, all applicants must be able to document at least 12 hours of graduate coursework in Advanced Statistics, Research Design and Methodology, and Test and Measurement Theory.

The following materials should be submitted to complete the application:

- 1) A vita of relevant work and education experiences. (Please include a description of clinical experiences, testing abilities, and training in research and measurement.)
- 2) An official transcript of all post-baccalaureate credits.
- 3) A completed APPIC application form (available for downloading from the internet at: www.appic.org).
- 4) Supplemental Application Form, below, to be completed in addition to the APPIC application form. Three training tracks are available: 1) Developmental Neuropsychology; 2) General Clinical Psychology with Health focus; 3) Forensic Psychology. Applicants may apply to one or all tracks by listing the appropriate numbers on their APPIC match forms. Applicants should also inform Utah State Hospital about their interest in each track to ensure that they are considered for the proper track(s).
- 5) A personal statement of your goals for and your expectations of this internship, including areas of interest (e.g., specific training track specialty area and with which patient populations), specific areas in which you think you need further development, and descriptions of clinical strengths.
- 6) Two letters of reference from people who are familiar with your clinical work.
- 7) A letter from your graduate program Training Director, certifying that you are in good standing with the university and will have completed all the requirements for the doctoral degree except for internship(all course work, 500+ practicum hours, and defense of dissertation prospectus) by the beginning of the internship year. This letter should be in addition to the two letters requested above.

Your completed application must be received no later than November 15, 2003 to be considered for the 2004-2005 internship year. Do not fax your application.

The starting date of the 2004-2005 internship year will be July 1, 2004.

All application materials should be addressed to:

Robert F. Sawicki, Ph.D.
Director of Internship Training
Utah State Hospital
P.O. Box 270
Provo, Utah 84603-0270
Phone: (801) 344-4276
E-Mail: rsawicki@utah.gov

Recruitment Procedure

At the time that application materials are mailed to you, your name will be assigned to one of the members of the Psychology Pre doctoral Internship Program Selection Committee who will serve as your liaison during the application process. The liaison will be your contact person during the period prior to the application closing date, should you wish to talk directly with someone here to obtain general information about the training program.

Applications completed and received by the closing date (November 15) will be reviewed and rated by three different members of the Selection Committee no later than three weeks after the closing date. These ratings will be used to determine which applicants will receive further consideration based on qualifications and fit with the program. All applicants will be notified as early as possible after the file review concerning their status.

Each applicant who remains under active consideration after the initial review of application materials will be invited to interview with three members of the Selection Committee. The Selection Committee is composed of psychology faculty and intern representatives. One of these will be the liaison initially assigned to the applicant. During this stage, this liaison will assist the applicant in coordinating interviews.

Interviews may be scheduled and conducted either in person or by telephone. We do not require you to travel here for an interview, although applicants are encouraged to visit and tour the facilities. Not having an in person interview should not be seen as a disadvantage.

Prior to Uniform Notification Day, the Selection Committee meets and determines the match order based on application and interview ratings. The entire list of interviewed applicants is reviewed to ensure that all applicants have received fair and equal consideration. **This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant.**

Please complete the next page below . . .

**UTAH STATE HOSPITAL
PREDOCTORAL PSYCHOLOGY INTERNSHIP PROGRAM
SUPPLEMENTAL APPLICATION FORM
(To Be Completed In Addition To The Appic Application Form)**

Instructions: There are three separate training tracks available at the Utah State Hospital. Each track has a separate APPIC number. We welcome your application to as many as two tracks, but you must list each track separately on your match form.

Please rate your interest in the top one or two tracks using the numbers 1 and 2, (#1 indicating most interested, #2 indicating second preference and leave a blank for no interest):

Applicant Name: _____

___ Developmental Neuropsychology

___ General Clinical Psychology

___ Forensic Psychology

Internship Offers and Acceptances

The Utah State Hospital Psychology Internship participates in the APPIC Match process and adheres to all APPIC Match Policies. These policies, along with the standard APPIC application form, are available at <http://www.appic.org/d08match-policies.html>.

Match policies should be read and closely followed by all applicants to the Utah State Hospital Psychology Internship Program.